

Report on the Health Status of Older Adults

Apache County, Arizona

Established by the Arizona Department of Health Services (ADHS), the Healthy Aging 2010 project focuses on issues related to health promotion and disease prevention in older adults. While the older adult population in Arizona is living longer, older adults are not necessarily living healthier lives. Chronic diseases occurring in conjunction with emotional health problems are the most prevalent yet preventable health problem in the State. An analysis of available indicators of older adult health provides information for planning and community initiatives. The following information and data describe the current health status of adults 65 years of age and older living in Apache County.

Population Characteristics

Table 1 presents information about the characteristics of older adults living in Apache County, as compared to Arizona and the United States. The 2001 population figures were estimated based on the 2000 U.S. Census. Approximately 8% of the total population in Apache County is over the age of 65, compared to 13.0% for the state and 12.4% for the United States. For all regions, the proportion of females is higher than males within the 65 and older age group.

TABLE 1: POPULATION ESTIMATES * FOR 2001

	Apache County	Arizona	United States
Total Population	68,610	5,307,331	284,796,887
Age 65+ Population	5,674 (8.3%)	690,995 (13.0%)	35,411,395 (12.4%)
Gender, Age 65+			
Male	2,570 (45.3%)	306,535 (44.4%)	14,582,434 (41.2%)
Female	3,104 (54.7%)	384,460 (55.6%)	20,828,961 (58.8%)
Race/Ethnicity, Age 65+			
Caucasian, non-Hispanic	1,522 (26.8%)	599,209 (86.7%)	29,595,582 (83.6%)
Hispanic	226 (4.0%)	57,413 (8.3%)	1,754,381 (5.0%)
African American	13 (0.2%)	10,053 (1.5%)	2,856,805 (8.1%)
American Indian	3,890 (68.6%)	14,360 (2.1%)	140,099 (0.4%)
Asian	6 (0.1%)	6,454 (1.0%)	810,399 (2.3%)
Other	17 (0.3%)	3,506 (0.5%)	254,130 (0.7%)

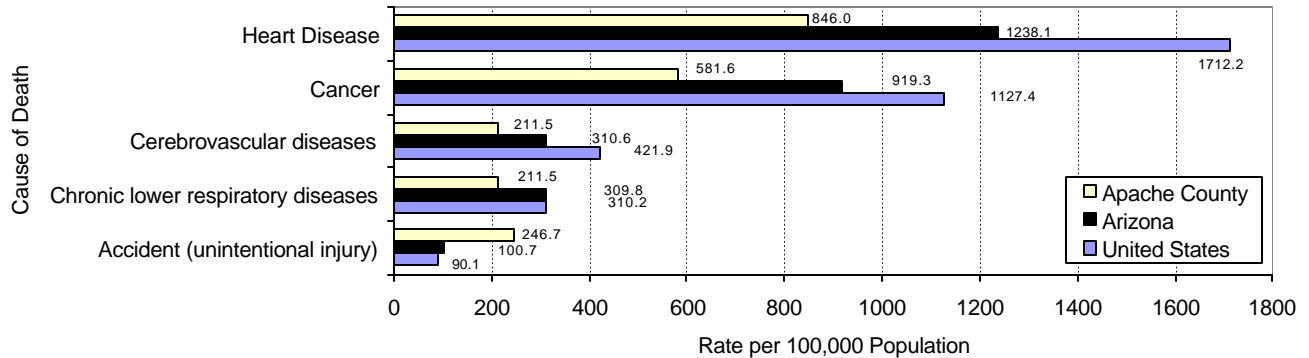
*Estimates calculated based on the 2000 U.S. Census

Mortality and Hospitalizations

The five leading causes of death among adults age 65 and older in Apache County for 2001 are shown in Figure 1. Since national death rates are not currently available for 2001, U.S. preliminary death data for the year 2000 are included in the figure for the purpose of a general comparison. Heart disease and cancer are the leading causes of death among older adults, although Apache County reported considerably lower death rate in these categories than the state and national levels. Lung cancer is the leading cause of cancer deaths for both county and statewide; Apache County reported 72% lower death rate due to lung cancer than the state in 2001. Accidents/unintentional injuries were the fifth leading cause of death among older adults in Apache County in 2001, a significantly higher rate than reported both statewide and nationally. A review of mortality data for the years 1996-2000 indicates that Apache County reported an average of 88% higher death rate annually due to accidents/unintentional injuries than Arizona for the five-year period.

Within the accidents/unintentional injury category, motor vehicle accidents claimed the most lives among older adults in Apache County during 2001 (123.4 deaths per 100,000 individuals).

FIGURE 1: FIVE LEADING CAUSES OF DEATH AMONG ADULTS AGE 65 AND OLDER; MORTALITY RATE PER 100,000



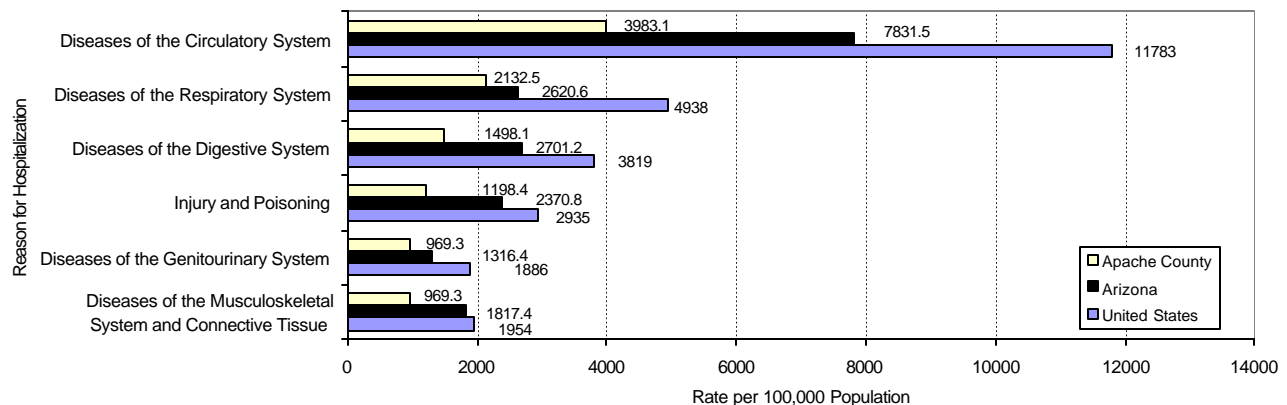
Source: Advance Vital Statistics Report. Arizona Department of Health Services: 2001.

Note: Corrections have been made to reassign reported deaths in Arizona counties originally listed as unknown.

National Vital Statistics Report, Deaths: Preliminary Data for 2000. Centers for Disease Control and Prevention: 10/2001.

Figure 2 depicts the six leading causes of hospitalizations among older adults in non-federal facilities in Apache County, Arizona, and the United States, based on primary ICD9 diagnosis codes. While county and state data reflect hospitalizations during the year 2001, but because national hospital discharge data are not currently available for 2001, U.S. data for the year 2000 are included for the purpose of a general comparison. Federal facilities, such as Indian Health Services and Veterans Affairs hospitals, are not included within these data, and care must be given when considering hospitalizations within these populations. Also hospitalization data do not include treatment in emergency departments or outpatient facilities. Additionally, it is important to note that hospital discharge data describe the number of hospitalizations, rather than individuals; one individual may be represented multiple times within the data if that individual was hospitalized on multiple occasions within the same year.

FIGURE 2: SIX LEADING CAUSES OF HOSPITALIZATION AMONG ADULTS AGE 65 AND OLDER; HOSPITALIZATION RATE PER 100,000



Source: 2001 Hospital Discharge Data. Arizona Department of Health Services.

Advance Data from Vital and Health Statistics, 2000 National Hospital Discharge Survey. Centers for Disease Control and Prevention: 6/2002.

Apache County reported a total of 821 hospital discharges in 2001. For all categories, Apache County reported a lower hospitalization rate than Arizona, and both county and state hospitalization rates were lower in 2001 than the rate reported nationally for 2000. In considering diseases of the circulatory, respiratory, genitourinary, and musculoskeletal/connective tissue systems individually, the leading medical condition within each category resulting in hospitalization for older adults countywide was heart failure, pneumonia, urinary tract infections, and arthritis, respectively. Gastrointestinal hemorrhage, gastroenteritis, and esophageal reflux were the primary causes of hospitalization within the category of diseases of the digestive system, resulting in an equal number of hospitalizations among older adults in Apache County in 2001. Within the injury and poisoning category, hip fractures were the most frequently diagnosed medical condition, and falls were reported as the main cause of injury. The average length of stay in the hospital among older adults in Apache County was 4.9 days, compared to 4.7 days for Arizona and 6.0 days nationally (year 2000 data). The average hospitalization charges for Apache County seniors in 2001 was \$16,980, compared to \$21,289 for the state; national figures are not available. Cumulative data indicate that Apache County seniors incurred total hospitalization costs equaling \$13,940,260 for the year 2001.

Risk Factors

In considering leading chronic health conditions and mortality, it is important to keep in mind the role that risk factors play in health. The Behavioral Risk Factor Surveillance Survey (BRFSS), established by the Centers for Disease Control, is a national telephone survey that polls individuals about specific high-risk behaviors, and is a useful tool in assessing the general health of the population.

Through the use of random dialing, the survey provides a representative cross-section of the national population. On a local level, however, the BRFSS is limited in its ability to represent the population, due to small sample sizes. Additionally, individuals not having a telephone within their household are excluded from participation, which in Arizona includes approximately 6% of the total population. **Thus, BRFSS data reported for the county is not necessarily representative of the county population as a whole, and caution must be used in interpreting data beyond the context of the surveyed population.** Despite their limitations, BRFSS data nonetheless provide general indicators about a community's health status. Table 2 describes demographic characteristics of the surveyed BRFSS population in 2000.

TABLE 2: CHARACTERISTICS OF RESPONDENTS ON THE BRFSS 2000, ADULTS 65+

	Apache County	Arizona	United States
Number of respondents, ages 65+	10	624	34,087
Gender			
Male	2 (20.0%)	245 (39.3%)	11,913 (34.9%)
Female	8 (80.0%)	379 (60.7%)	22,174 (65.1%)
Race/Ethnicity			
Caucasian, non-Hispanic	7 (70.0%)	566 (90.7%)	28,915 (84.8%)
Hispanic	2 (20.0%)	45 (7.2%)	1,977 (5.8%)
Black	0	5 (0.8%)	1,764 (5.2%)
American Indian	1 (10.0%)	5 (0.8%)	332 (1.0%)
Other	0	3 (0.5%)	1,099 (3.2%)
Mean Age (Years)	72.5	73.8	74.0

As previously mentioned, BRFSS data may be limited due to small sample sizes. In the case of Apache County, only 10 residents were interviewed for the 2000 BRFSS; of these 10 individuals, 8 respondents were female. While data are reported for all 10 respondents, it is important to remember the small sample size and skewed gender proportion in evaluating the information presented.

Of the 10 older adults surveyed in Apache County, 40.0% described their general health status as very good or excellent, compared to 41.3% for the state and 35.4% for the United States. One surveyed adult (10.0%) in the county described his/her general health as poor, a slightly higher rate than those reported for the state and the United States, 8.8% and 9.6% respectively.

Being overweight or obese, poor dietary habits, little or no physical activity, and tobacco use are all associated with an increase in health problems. As shown in Table 3, 60% of the surveyed older adults in Apache County are classified as overweight or obese by national health standards, yet only 20.0% of respondents reported current attempts at losing weight. Half of the respondents in Apache County (50.0%) reported that they did not consume the recommended 5 or more servings of fruits and vegetables a day, and 60.0% reported being physically inactive. The remaining 40.0% of respondents reported participating in a physical activity, all of whom reported exercising at the recommended activity level of 20 minutes or more on 3 or more days per week. This is slightly more than the state and national reported figures of 35.9% and 37.3%, respectively.

The most popular activities among older adults, as reported on the statewide 2000 BRFSS, are walking, gardening, golf, aerobics, and bicycling. Also in 2000, 10.0% of surveyed adults in Apache County reported that they are current daily smokers, a higher incidence than reported for the state and the nation, 7.4% and 7.9%, respectively.

TABLE 3: RISK FACTORS AMONG RESPONDENTS AGE 65 AND OLDER; BEHAVIORAL RISK FACTOR SURVEILLANCE SURVEY, 2000

	Apache County	Arizona	United States
Weight Group¹			
Normal weight	40.0%	46.8%	42.5%
Overweight	50.0%	35.1%	36.7%
Obese	10.0%	17.0%	16.8%
Unknown	0.0%	1.1%	4.0%
Daily Servings of Fruits and Vegetables			
Less than once a day or never	0.0%	1.4%	3.3%
1 to less than 3 times per day	40.0%	16.8%	21.9%
3 to less than 5 times per day	10.0%	38.8%	43.3%
5 or more times per day	50.0%	42.9%	31.5%
Activity level/exercise²			
Physically inactive	60.0%	37.5%	37.0%
Less than recommended activity	0.0%	26.6%	25.7%
Meets recommended activity level	40.0%	35.9%	37.3%
Smoking status			
Current smoker, smoke everyday	10.0%	7.4%	7.9%
Current smoker, smoke some days	0.0%	1.9%	2.1%
Former smoker	50.0%	41.3%	37.4%
Never smoked	40.0%	48.7%	52.1%
Don't know/refused question	0.0%	0.6%	0.5%

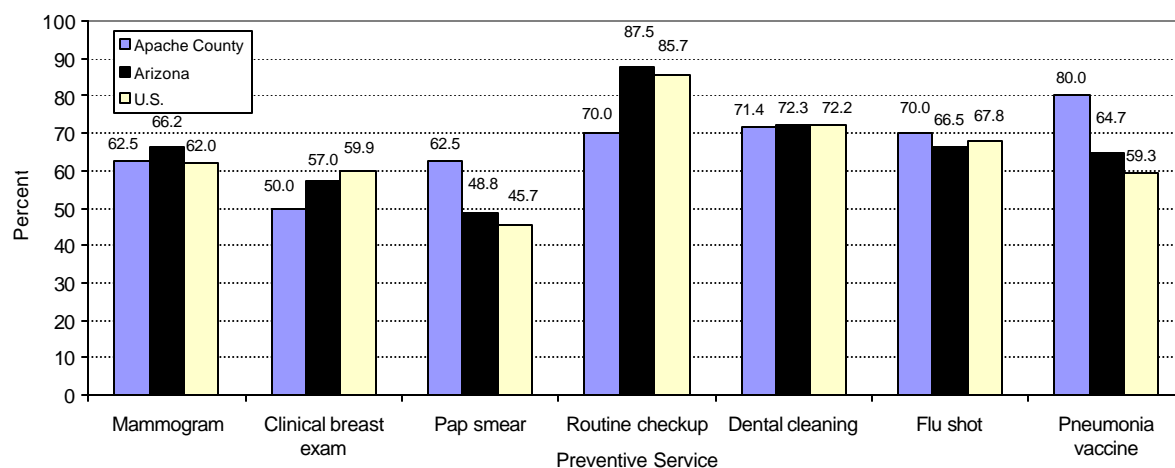
¹Based on Body Mass Index, BMI<25.0 normal weight, BMI 25.0 and < 30.0 overweight, BMI 30.0 obese

²Recommended activity is exercise 3 or more days per week for 20 minutes or more

Preventive Care

The use of preventive care services provides an effective means for maintaining or improving individual health status, and is especially important for the aging population. Yearly screenings for older adults are recommended for a number of healthcare services. Figure 3 demonstrates the use of such services among those age 65 years and older adults within the past year, as reported on the BRFSS. The percentage for pneumococcal vaccine; are reported for individuals receiving the vaccine at any point in their life.

FIGURE 3: PERCENT OF INDIVIDUALS 65+ BY RECOMMENDED PREVENTIVE SERVICES USE; BEHAVIORAL RISK FACTOR SURVEILLANCE SURVEY, 2000



Among Apache County survey respondents, having a pneumonia vaccine was the highest reported use of a preventive service, with a rate of 80%, compared to 64.7% and 59.3% for Arizona and the United States, respectively. A slightly higher county rate was also reported for obtaining a yearly flu vaccination (70.0%), compared to state and national levels, 66.5% and 67.8%, respectively. Apache County fell behind Arizona and the United States in the category of routine medical checkups; 70% of county interviewees reported having routine checkups yearly, compared to a rate of more than 85% reported statewide and nationally. Yearly dental cleanings were reported by approximately 72% of all county, state, and national respondents.

In the category of women's health, half of all older female respondents in Apache County reported having a yearly breast exam performed by a health professional, a slightly lower rate than reported statewide and nationally. Over 60% of all female survey respondents reported having yearly mammograms, with slightly higher rates reported for Arizona compared to Apache County and the United States. Yearly Pap smears were obtained by 62.5% of all county respondents, compared to 48.8% statewide and 45.7% nationally.

Mental Health and Support Services

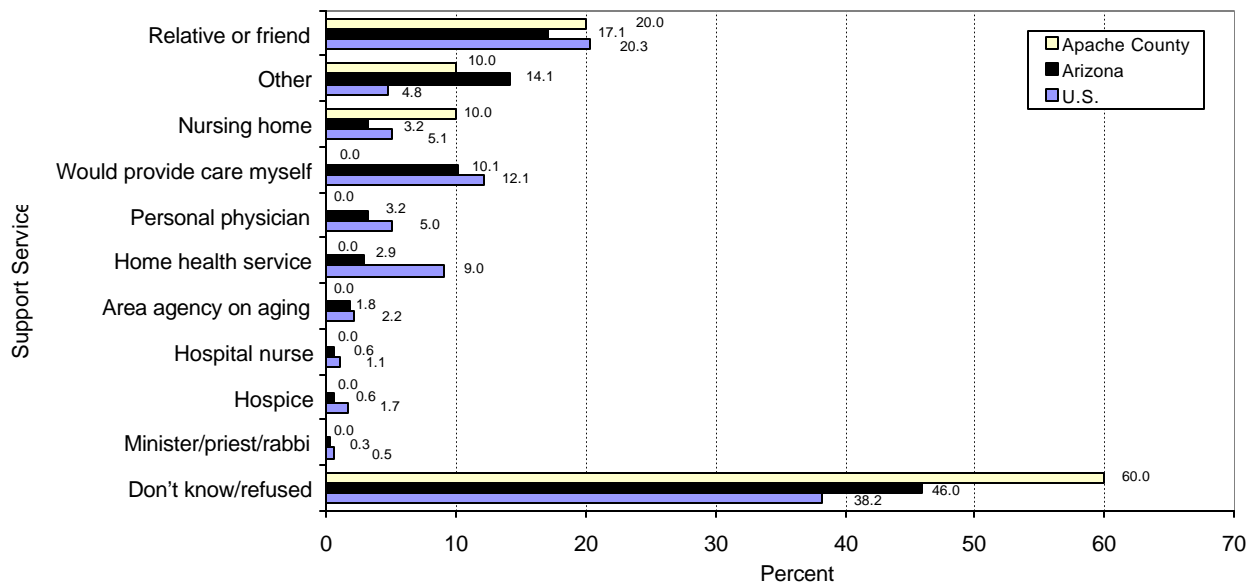
According to BRFSS 2000 data, older respondents in Apache County reported an average of 0.3 days during the past month when their mental health was "not good", in comparison to 1.7 days reported for Arizona and 2.1 days reported nationally. When questioned about more specific indicators of mental health status, for example feeling depressed, anxious, or not well-rested, 20.0% of older respondents in Apache County reported having at least 14 days of poor emotional health

within the past month, compared to 23.7% of state and 22.3% of national respondents. While BRFSS data are by no means a clinical diagnosis of mental conditions, 14 or more days of poor emotional health may indicate a need to seek professional attention.

Despite the proportion of older BRFSS respondents reporting poor emotional health, ADHS data indicate that only 0.5% of the population aged 60 and older received mental health treatment in 2000 through Regional Behavioral Health Authorities (RBHAs). RBHAs are community-based organizations contracted by ADHS that provide a variety of mental health services, predominately to individuals suffering from serious mental illnesses. Although these data only describe use of public mental health programs excluding treatment provided by private agencies or personal physicians it is nonetheless clear that many older adults in Arizona are not utilizing available mental health support services.

Support services potentially serve an important function in the daily lives of older adults who are unable to care for themselves. However, as shown in Figure 4, based on the 2000 BRFSS, 60% of county respondents did not know who to call for assistance in the event that an elderly friend or relative required care. Although there are public services available to the aging community, only 10% of the older respondents in Apache County thought of these services as a resource for needed care, and of those services the only resource cited was a nursing home.

FIGURE 4: PERCENT OF INDIVIDUALS 65+ BY PLANNED USE OF SUPPORT SERVICES; BEHAVIORAL RISK FACTOR SURVEILLANCE SURVEY, 2000



BRFSS 2000: "Who would you call to arrange short or long-term care in the home for an elderly relative or friend who was no longer able to care for themselves?"

Survey participants were also questioned about their own need for assistance with personal care needs (e.g. eating, bathing) or routine needs (e.g. household chores, shopping). Two individuals responded to these questions in Apache County. Of those, 1 person reported that he/she did not need help with personal care needs; the remaining respondent indicated that his/her spouse or partner provided the necessary care. Neither respondent reported that they needed assistance with routine tasks. Statewide and nationally, family and friends were the most frequently mentioned resource for assistance with personal or routine needs. Among public services available, use of a paid employee

or home health agency was the most often cited public service utilized for both personal care and routine needs.

Healthy Aging 2010

Working with government agencies, non-profit organizations, and private community-based programs, the Healthy Aging 2010 plan will “connect the dots” to the many activities and programs currently available to meet the needs of older Arizonans. For communities already engaged in health-related projects, it is hoped that this report will provide updated information on older adult health in Apache County. For communities not yet formally involved in such activities, hopefully this report will encourage interest and dialogue around initiating such projects. To learn more about the Healthy Aging 2010 plan, please contact Ramona Rusinak at (602) 542-1223 or visit the Healthy Aging 2010 website at <http://www.hs.state.az.us/phs/healthyaging2010/index.htm>.

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